

To: Manhattan Community Board 3, Health and Human Services Committee  
From: Mariana Rich, 2014 – 2015 FCNY Community Planning Fellow  
Date: December 9th 2014  
Re: Community Accessibility Study

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### I. INTRODUCTION

- **Executive Summary:**

The community planning fellow, Mariana Rich, will work on a pilot project to measure the accessibility of goods and services, the public right of way (sidewalks and street crossings) and housing typologies in a selected geographic area for populations with mobility disabilities and seniors aged 75 and older.

- **Project Description:**

The study will analyze the accessibility in a specific geographic area of CD3 in order to improve the quality of life and to address current and future accessibility issues focusing on the needs and concerns of populations with mobility disabilities and seniors aged 75 and older. The pilot project aims to create a model that can be conducted in other applicable areas of the community district and potential recommendations and actions steps will be given to Community Board 3's Health and Human Services Committee in May 2015

- **Approach:**

Phase 1 / Literature Review and Assessment:

- Literature Review on community accessibility to identify important themes
- Review of the community district needs and analysis of existing conditions.
- Compilation and analysis of relevant data, identify if new data is necessary.
- Identification of potential areas of study and selection criteria.

Phase 2 / Geographic Area of Study:

- Once the geographic area has been selected, collect new data and information identified in phase 1 and look if any new information might be needed (given its geographic location and/or community services). Determine methodology (potential survey)
- Identify gaps in accessibility to local goods and services.
- Possible solutions and recommendations

## II. LESSONS LEARNED FROM LITERATURE REVIEW

### Global Trends:

- In less than 10 years, for first time in history, the number of older adults will exceed the number of children (Withnall, 2012).
- In 2010 older adults comprised 11% of the world population and projections estimate it will get to 22% by 2050 (World Economic Forum, 2012).
- The economic costs of providing life dependency and medical needs will rise as the number of older adults continues to increase (Johnson, Toohey, & Wiener, 2007).

### United States:

- “By 2030 the number of Americans aged 65 or older will exceed 70 million comprising 20 percent of the population in the U.S.” (U.S. Census Bureau, 2012).
- Older adults in the United States have considerable late-life disability and care needs according national data from 2011 National Health and Aging Trends Study (NHATS) (Freedman and Spillman, 2014).

### New York City and CD3:

- Among older adults, those 80.6 and older, life expectancy is higher in NYC than in the rest of the country which means the city should prepare and expect a growth of older senior residents in their 80’s and 90’s (Maltz et al., 2014).
- NYC counts with a population of 8.2 million residents of which more than 1 million are older adults. In the next 20 years the population over 60 will increase by a 50 percent (Age Friendly NYC, 2012).
- 13,281 seniors (65+) in CB3 are below the poverty line, which is approximately 58% of seniors in the district. (District Needs Statement for Fiscal Year 2016, p.8)
- According NYC Department of Aging and the U.S. Census there are 22,847 seniors in CB 3, which is approximately 14% of the total population. (District Needs Statement for Fiscal Year 2016, p.7)
- 70% of CB3 senior are foreign born – the second highest ranking district in Manhattan.

NOTE: The term older adults usually refers to population 60 old older unless it specifies other.

### III. FINDINGS

The following data analyses the concentration of older adults (75+) and population (75+) with ambulatory difficulties at 3 levels: New York City, Manhattan and Community District 3

- 1) The first finding suggests that the percent share of older adults (75+) is the same at the 3 levels being 6% share of the total population. See figure 1.

Older Adults (75+) Population			
	NYC	Manhattan	CD3
75+ Population	461,697	98,784	12,558
% Share of Total Population	6%	6%	8%

Figure 1: Older Adults 75+ Population  
Source: U.S. Census Bureau, 2010

- 2) The percent share of the total population with ambulatory difficulties in New York City and Manhattan is 7% while in Community District 3 is slightly higher being of 9%. See figure 2 to 4.

#### Population in NYC with Ambulatory Difficulties

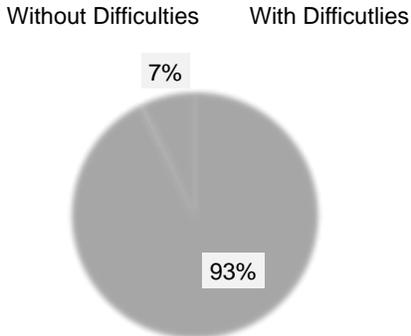


Figure 2: Population in NYC with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

#### Population in Manhattan with Ambulatory Difficulties

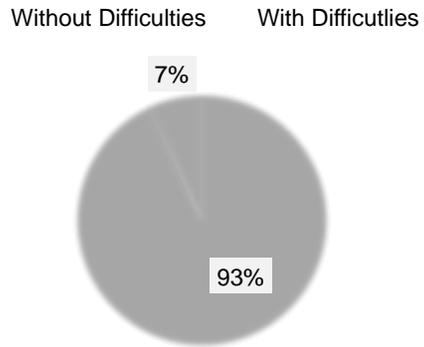


Figure 3: Population in NYC with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

#### Population in CD3 with Ambulatory Difficulties

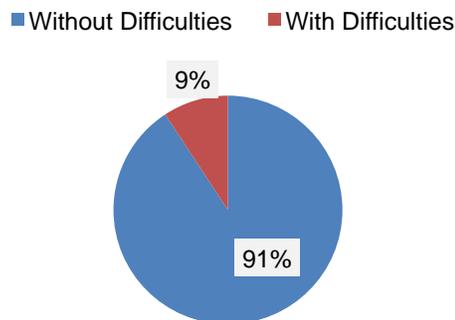


Figure 4: Population in NYC with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

3) While the percent share of the total population with ambulatory difficulties at the 3 levels is not relatively high, when analyzing the percentage share among the older adult (75+) groups the percent share has a significant increase and varies among gender. Once again the percent share of NYC and Manhattan are very similar being 32% and 30% of older male adults (75+) with ambulatory difficulties respectively, and in Community District 3 is once again higher with a 39% share. See figure 4 to 6.

**Men 75+ in NYC with Ambulatory Difficulties**

Without Difficulties      With Difficulties

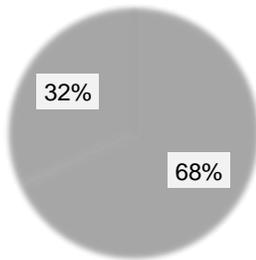


Figure 4: Men 75+ in NYC with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

**Men 75+ in Manhattan with Ambulatory Difficulties**

Without Difficulties      With Difficulties

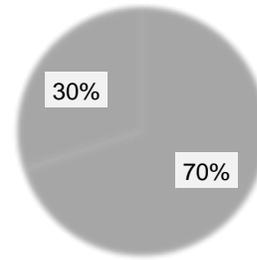


Figure 5: Men 75+ in Manhattan with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

**Men 75+ in CD3 with Ambulatory Difficulties**

■ Without Difficulties      ■ With Difficulties

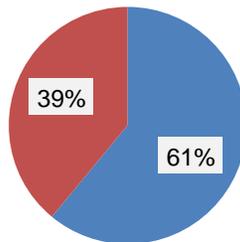


Figure 6: Men 75+ in CD3 with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

Findings also suggest that the percent share of ambulatory difficulties is higher in women than men being of 44% in NYC, 41% in Manhattan and 49% in CD3. See figures 7 to 9.

### Women 75+ in NYC with Ambulatory Difficulties

Without Difficulties      With Difficulties

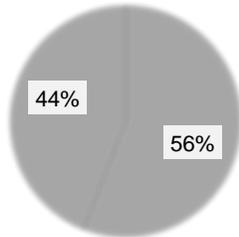


Figure 7: Women 75+ in NYC with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

### Women 75+ in Manhattan with Ambulatory Difficulties

Without Difficulties      With Difficulties

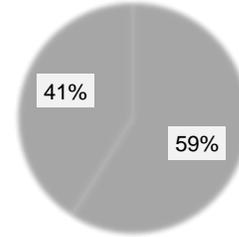


Figure 8: Women 75+ in Manhattan with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

### Women 75+ in CD3 with Ambulatory Difficulties

■ Without Difficulties      ■ With Difficulties

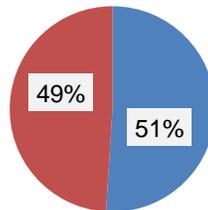


Figure 9: Women 75+ in CD3 with Ambulatory Difficulties  
Source: U.S. Census Bureau, ACS 2008 - 2012

For more detailed tables about ambulatory difficulties by age group please see Appendix A.

#### IV. SUGGESTED GEOGRAPHIC AREAS FOR STUDY

Findings suggest 3 potential areas of study highlighted in red in the following map. They are Census Tracts 8, 16 and 18.

**Suggested Areas for Study**



Source: NYC Department of City Planning

The criteria for selection was based on the following:

- High concentrations of older adult population (75+). See Appendix B
- High concentrations of older adults (65+) with low median household income. See Appendix C.
- High concentrations of population with ambulatory difficulties (75+). See Appendix D
- Located close to commercial strips, open space and public facilities. See Appendix E.
- Good mix of housing typologies that is looking not only for 20 story buildings but also tenement buildings which do not have elevators. See Appendix E and F.
- Complicated intersections, wide roadways and high concentration of collisions. See Appendix G.

## **V. NEXT STEPS**

- Start with Phase 2 of this study that will require:
  - Field surveys to identify physical conditions and gathering of data (e.g. conditions of housing, sidewalks, crossings, ramps, bus stops..)
  - Realize focus groups to identify the selected population major life activities and needs (demand + need) and if they are physically accessible.
  - Identify accessibility gaps
  - Analyze case studies
  - Make potential recommendations to bridge accessibility gaps

Thank you.

## VI. APPENDIX

### Appendix A

#### NYC Ambulatory Difficulties

	With	Without	% of Population with Difficulties
5 to 17	10,014	1,236,527	1.0%
18 to 34	23,161	2,223,201	1.0%
35 to 64	210,814	2,931,279	7%
65 to 74	96,788	434,001	18%
75 and over	174,502	265,444	40%
<b>TOTAL</b>	<b>515,279</b>	<b>7,090,452</b>	<b>7%</b>

#### Manhattan Ambulatory Difficulties

	With	Without	% of Population with Difficulties
5 to 17	1,531	157,206	1.0%
18 to 34	3,743	517,052	1.0%
35 to 64	37,185	579,417	6%
65 to 74	18,590	96,596	16%
75 and over	34,737	60,223	37%
<b>TOTAL</b>	<b>95,786</b>	<b>1,410,494</b>	<b>7%</b>

#### Male

	With	Without	% of Population with Difficulties
5 to 17	5,629	629,736	1%
18 to 34	10,692	1,073,976	1%
<b>35 to 64</b>	<b>82,765</b>	<b>1,398,306</b>	<b>6%</b>
65 to 74	33,682	193,262	15%
<b>75 and over</b>	<b>51,018</b>	<b>110,423</b>	<b>32%</b>
	183,786	3,405,703	5%

#### Male

	With	Without	% of Population with Difficulties
5 to 17	746	79,682	1%
18 to 34	1,618	238,519	1%
<b>35 to 64</b>	<b>13,742</b>	<b>285,301</b>	<b>5%</b>
65 to 74	6,372	42,978	13%
<b>75 and over</b>	<b>10,604</b>	<b>25,400</b>	<b>30%</b>
	33,082	671,880	5%

#### Female

	With	Without	% of Population with Difficulties
5 to 17	4,385	606,791	1%
18 to 34	12,469	1,149,225	1%
35 to 64	128,049	1,532,973	8%
65 to 74	63,106	240,739	21%
<b>75 and over</b>	<b>123,484</b>	<b>155,021</b>	<b>44%</b>
	331,493	3,684,749	8%

#### Female

	With	Without	% of Population with Difficulties
5 to 17	785	77,524	1%
18 to 34	2,125	278,533	1%
35 to 64	23,443	294,116	7%
65 to 74	12,218	53,618	19%
<b>75 and over</b>	<b>24,133</b>	<b>34,823</b>	<b>41%</b>
	62,704	738,614	8%

\* This numbers are subject to margins of errors that make this numbers approximations and not precise calculations.

Source: U.S. Census Bureau, ACS 2008 - 2012 Sex by Age by Ambulatory Difficulty

\* This numbers are subject to margins of errors that make this numbers approximations and not precise calculations.

Source: U.S. Census Bureau, ACS 2008 - 2012 Sex by Age by Ambulatory Difficulty

### CD3 Ambulatory Difficulties

	With	Without	% of Population with Difficulties
5 to 17	302	15,959	2%
18 to 34	483	56,615	1%
35 to 64	4,845	60,595	7%
65 to 74	2,793	9,977	22%
75 and over	5,518	6,623	45%
<b>TOTAL</b>	<b>13,941</b>	<b>149,769</b>	<b>9%</b>

	With	Without	% of Population with Difficulties
<b>Male</b>			
5 to 17	205	8,184	2%
18 to 34	118	27,381	0.4%
35 to 64	2,188	30,074	7%
65 to 74	963	4,877	16%
<b>75 and over</b>	<b>1,774</b>	<b>2,770</b>	<b>39%</b>
	5,248	73,286	7%

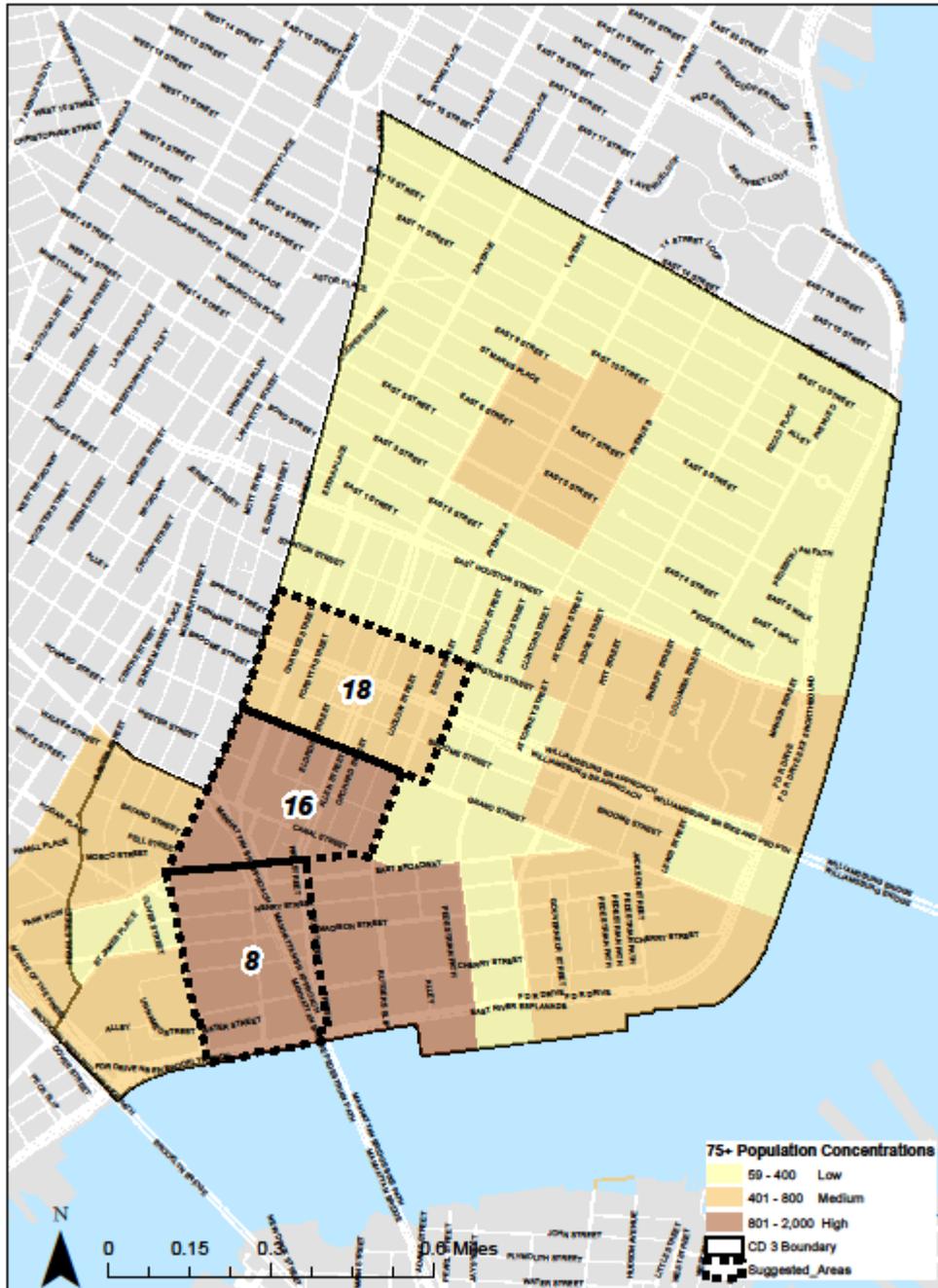
	With	Without	% of Population with Difficulties
<b>Female</b>			
5 to 17	97	7,775	1%
18 to 34	365	29,234	1%
35 to 64	2,657	30,521	8%
65 to 74	1,830	5,100	26%
<b>75 and over</b>	<b>3,744</b>	<b>3,853</b>	<b>49%</b>
	8,693	76,483	10%

\* This numbers are subject to margins of errors that make this numbers approximations and not precise calculations.

Source: U.S. Census Bureau, ACS 2008 - 2012 Sex by Age by Ambulatory Difficulty

# Appendix B

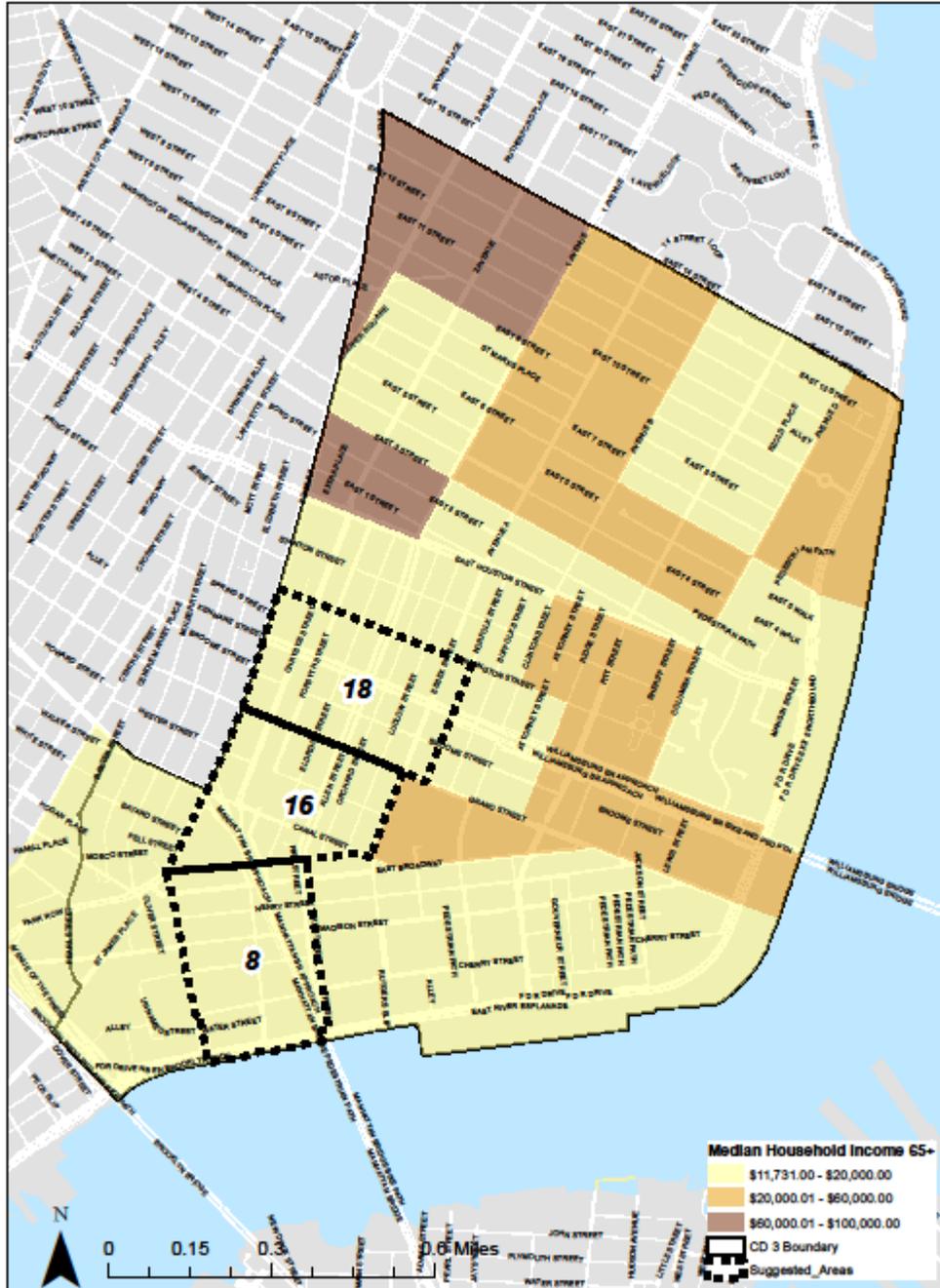
## Older Adult (75+) Population Concentrations



Source: U.S. Census Bureau 2010

# Appendix C

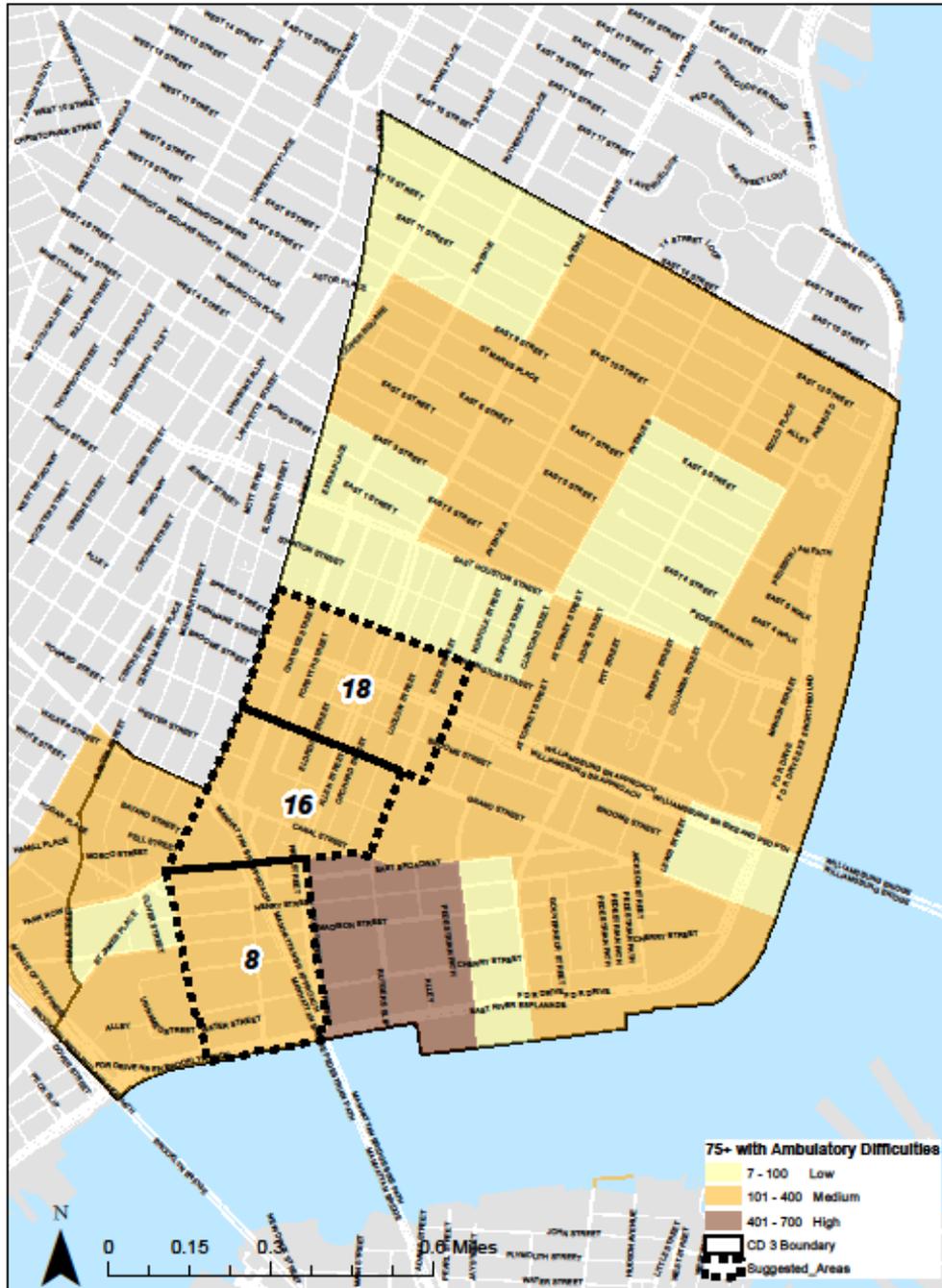
## Older Adult (65+) Median Household Income



Source: U.S. Census Bureau, ACS 2008 - 2012

# Appendix D

## Older Adult (75+) Population with Ambulatory Difficulties



Source: U.S. Census Bureau, ACS 2008 - 2012

# Appendix E

## Land Uses Community District 3 Manhattan



## Appendix F

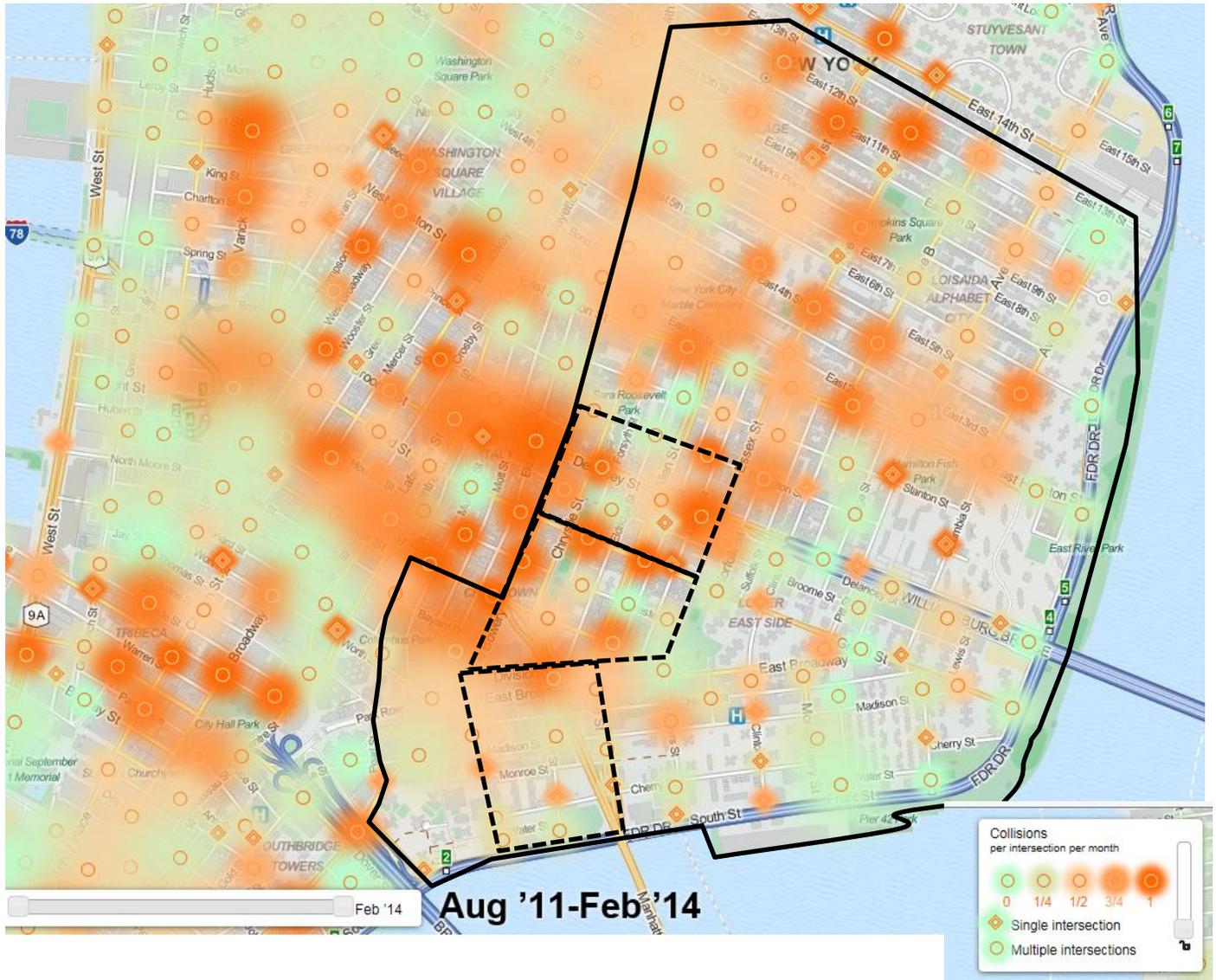
### NYCHA Housing Developments



Source:  
<http://maps.nyc.gov/nycha/im/wmp.do;jsessionid=8DAAC117296E698FDCE0B6B41CE86B18?>

# Appendix G

## Pedestrian Collisions per Intersection per Month



Source: nyc.crashmapper.com